PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
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1200 EAST 151ST STREET OLATHE, KS 66062				(Depositor's name)			
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				****		(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/663,045	09/13/2003		David J. Laverick		702.276	1970	
TITLE OF INVENTION: NAVIGATIONAL DEVICE FOR MOUNTING ON A SUPPORT PILLAR OF A VEHICLE AND A METHOD FOR DOING SAME							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$0	\$0	\$1510	10/27/2009	
EXAM	NER	ART UNIT	CLASS-SUBCLASS				
DIACOU, ARI M		3663	701-222000	_			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Unk recordation as set forth (A) NAME OF ASSIC	ess an assignee is ident in 37 CFR 3.11. Comp ENEE	ified below, no assignee pletion of this form is NO	(B) RESIDENCE: (CITY	atent. If an assigne assignment. Yand STATE OR CO	•		
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NOTE: The Issue Fee and	SMALL ENTITY state Publication Fee (if req	ıs. See 37 CFR 1.27.	d from anyone other than t		L ENTITY status. See 37 Cl		
	/ 0	M. Korte		Datef(0-7-9 056,557_		
Typed or printed name	Samuel	M. Korte		Registration No	o. <u>56,557</u>		
submitting the completed this form and/or suggestic Box 1450, Alexandria, V Alexandria, Virginia 223	application form to the ons for reducing this buing in 22313-1450. DC 13-1450.	CUSPTO. Time will vary rden, should be sent to the NOT SEND FEES OR (depending upon the individual of the control of the control of the complete of	retain a benefit by th timated to take 12 m vidual case. Any cor er, U.S. Patent and T O THIS ADDRESS.	ne public which is to file (and ninutes to complete, includin mments on the amount of tit frademark Office, U.S. Department of the Commissioner of the control isplays a valid OMB control isplays a valid OMB control	I by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	